

Docket No.: 106143

**DECLARATION AND POWER OF ATTORNEY
UNDER 35 USC §371(c)(4) FOR
PCT APPLICATION FOR UNITED STATES PATENT**

As a below named inventor, I hereby declare that:
my residence, post office address and citizenship are as stated below under my name;

I verily believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought, namely the invention entitled: DETECTION AND RECOGNITION OF OBJECTS BY MULTISPECTRAL SENSING

described and claimed in international application number PCT/IL98/00568 filed November 20, 1998.

I have reviewed and understood the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose to the Office all information known to me to be material to patentability as defined in Title 37, Code of Federal Regulations §1.56.

Under Title 35, U.S. Code §119, the priority benefit of the following foreign application(s) filed by me or my legal representatives or assigns within one year prior to my international application are hereby claimed:

Israeli Patent Application No. 12258 filed November 20, 1997

The following application(s) for patent or inventor's certificate on this invention were filed in countries foreign to the United States of America either (a) more than one year prior to my international application, or (b) before the filing date of the above-named foreign priority application(s):

I hereby appoint the following as my attorneys of record with full power of substitution and revocation to prosecute this application and to transact all business in the Patent Office:

James A. Oliff, Reg. No. 27,972; William P. Bernhardt, Reg. No. 30,024;
Kirk M. Hansen, Reg. No. 27,563; Thomas J. Pardini, Reg. No. 30,411;
Edward P. Walker, Reg. No. 31,400; Robert A. Miller, Reg. No. 32,771;
Mario A. Constantino, Reg. No. 33,583; and Stephen J. Roe, Reg. No. 34,463.

ALL CORRESPONDENCE IN CONNECTION WITH THIS APPLICATION SHOULD BE SENT TO OLIFF & BERNHARDT, P.C. BOX 19928, ALEXANDRIA, VIRGINIA 22320, TELEPHONE (703) 836-6400.

I hereby declare that I have reviewed and understood the contents of this Declaration, and that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

1	Typewritten Full Name of Sole or First Inventor	Yegor			KOLTUNOV
		Given Name	Middle Initial	Family Name	
2	Inventor's Signature	X			
3	Date of Signature	X			
		Month	Day	Year	
	Residence:	Holon		ISRAEL	
		City	State or Province	Country	
	Citizenship:	ISRAELI			
	Post Office Address:	Avivim Street 10/20, 58267, Holon ISRAEL			

Note to Inventor: Please sign name on line 2 exactly as it appears in line 1 and insert the actual date of signing on line 3.

IF THERE IS MORE THAN ONE INVENTOR USE PAGE 2 AND PLACE AN "X" HERE (2)
(Discard this page in a sole inventor application)

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OFFICE OF PETITIONS

1	Typewritten Full Name of Joint Inventor	Alexander	21 N 6 PN	MAXIMOV
		Given Name	Model Initial	Family Name
2	Inventor's Signature:	X	21 N 6 PN	
3	Date of Signature:	X	28	2000
		Month	Day	Year
	Residence:	Jerusalem		ISRAEL
		City	State or Province	Country
	Citizenship:	ISRAELI		
	Post Office Address: (Insert complete mailing address, including country)	Hastrash Street 17/20, 96181, Jerusalem ISRAEL		

1	Typewritten Full Name of Joint Inventor	Last Given Name		Middle Initial	FIRST Family Name
2	Inventor's Signature:	X			
3	Date of Signature:	X			
	Residence:	Month		Day	Year
	Citizenship:	City		State or Province	COUNTRY
	Post Office Address: (Insert complete mailing address, including country)	Ben-Gurion Street 7/30, 34018 City of Sharmat ISRAEL			

1	Typewritten Full Name of Patent Inventor	Motti Given Name		ALLON Family Name
2	Inventor's Signature	X <u>M. Allon</u>	Middle Initial	
3	Date of Signature	X <u>10</u> Month	<u>04</u> Day	<u>2000</u> Year
	Residence:	<u>Holon Mazharot Batya</u> City	State or Province	<u>ISRAEL</u> Country
	Citizenship:	<u>ISRAELI</u>		
	Post Office Address: (Insert complete mailing address, including country)	<u>Rabinovich Street 45, 38072 Holon ISRAEL</u> <u>Givati st. 10, Mazharot Batya, ISRAEL</u>		

1	Typewritten Full Name of Joint Inventor	Glen	D	GUTTMAN
2	Inventor's Signatures	X <u>Glen Guttmann</u>	Middle Initial	Family Name
3	Date of Signatures:	X <u>10</u>	<u>4</u>	<u>2000</u>
	Residence:	Tel Aviv	Day	Year
	Citizenship:	City	State or Province	Country
	Post Office Address: (Insert complete mailing address, including country)	Simeon Chen 39, 64166 Tel Aviv ISRAEL		

Note to Investor: Please sign name on line 2 exactly as it appears in line 1 and insert the actual date of signing on line 3.

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IF THERE IS MORE THAN ONE INVENTOR USE PAGE 3 AND PLACE AN "X" HERE ON

1 Typewriter File Name

1	Typewritten Full Name of Joint Inventor	Alexander		MAXIMOV
		Given Name	Middle Initial	Family Name
2	Inventor's Signature	X		
3	Date of Signature	X		
	Residence:	Jerusalem		ISRAEL
		City	State or Province	Country
	Citizenship:	ISRAELI		
	Post Office Address:	Haramim Street 17/20, 96181, Jerusalem ISRAEL		
	(insert complete mailing address, including country)			
1	Typewritten Full Name of Joint Inventor	Isaac		MERTIN
		Given Name	Middle Initial	Family Name
2	Inventor's Signature	X		
3	Date of Signature	X		
	Residence:	Givat Shmuel		ISRAEL
		City	State or Province	Country
	Citizenship:	ISRAELI		
	Post Office Address:	Ben-Gurion Street 7/30, 54018 Givat Shmuel ISRAEL		
	(insert complete mailing address, including country)			
1	Typewritten Full Name of Joint Inventor	Motti		ALLON
		Given Name	Middle Initial	Family Name
2	Inventor's Signature	X		
3	Date of Signature	X		
	Residence:	Holon		ISRAEL
		City	State or Province	Country
	Citizenship:	ISRAELI		
	Post Office Address:	Rabinovitch Street 44, 58672 Holon ISRAEL		
	(insert complete mailing address, including country)			
1	Typewritten Full Name of Joint Inventor	Oren		GUTTMAN
		Given Name	Middle Initial	Family Name
2	Inventor's Signature	X		
3	Date of Signature	X		
	Residence:	Tel Aviv		ISRAEL
		City	State or Province	Country
	Citizenship:	ISRAELI		
	Post Office Address:	Sderot Chen 39, 64166 Tel Aviv ISRAEL		
	(insert complete mailing address, including country)			

Note to Inventor: Please sign name on line 2 exactly as it appears in line 1 and insert the actual date of signing on line 3.

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IF THERE IS MORE THAN ONE INVENTOR USE PAGE 3 AND PLACE AN "X" HERE (X)

1 Typewritten Full Name

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<i>of Joint Inventor</i>				
2	Inventor's Signatures	<u>Ask</u>	<u>KERSHENBAUM</u>	
3	Date of Signatures	<u>10</u>	<u>4</u>	<u>2000</u>
	Residence:	<u>Rafanana</u>	<u>City</u>	<u>ISRAEL</u>
	Citizenship:	<u>ISRAELI</u>	<u>State or Province</u>	<u>Country</u>
	Post Office Address: (insert complete mailing address, including country)	<u>Moshe Dayan Street 3/1, 43580 Rafanana ISRAEL</u>		
1	<i>Typewritten Full Name of Joint Inventor</i>	<u>Given Name</u>	<u>Middle Initial</u>	<u>Family Name</u>
2	Inventor's Signatures			
3	Date of Signatures	<u>Month</u>	<u>Day</u>	<u>Year</u>
	Residence:	<u>City</u>	<u>State or Province</u>	<u>Country</u>
	Citizenship:			
	Post Office Address: (insert complete mailing address, including country)			
1	<i>Typewritten Full Name of Joint Inventor</i>	<u>Given Name</u>	<u>Middle Initial</u>	<u>Family Name</u>
2	Inventor's Signatures			
3	Date of Signatures	<u>Month</u>	<u>Day</u>	<u>Year</u>
	Residence:	<u>City</u>	<u>State or Province</u>	<u>Country</u>
	Citizenship:			
	Post Office Address: (insert complete mailing address, including country)			
1	<i>Typewritten Full Name of Joint Inventor</i>	<u>Given Name</u>	<u>Middle Initial</u>	<u>Family Name</u>
2	Inventor's Signatures			
3	Date of Signatures	<u>Month</u>	<u>Day</u>	<u>Year</u>
	Residence:	<u>City</u>	<u>State or Province</u>	<u>Country</u>
	Citizenship:			
	Post Office Address: (insert complete mailing address, including country)			

Note to Inventor: Please sign names on line 2 exactly as it appears in line 1 and insert the actual date of signing on line 3.

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